

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

APPLICATION FOR REFUND (USDC-CAND PAY.GOV)

PAY.GOV TRANSACTION DETAILS

IMPORTANT:

- Complete all required fields (shown in **red***); otherwise, your request may be denied and require resubmission.
- The information for the required receipt fields can be found in the Pay.gov screen receipt or confirmation email.

- 1. Your Name*:** John M. Desmarais
- 2. Your Email Address*:** jdesmarais@desmaraisllp.com
- 3. Receipt Agency Tracking ID for Refund*:** BCANDC-20893209
- 4. Transaction Date for Refund*:** July 15, 2025
- 5. Transaction Amount to be Refunded*:** \$405.00
- 6. Receipt Agency Tracking ID for Correct Receipt Number on Docket*:** ACANDC-20893547
- 7. Your Phone Number:** (202) 451-4923
- 8. Full Case Number (if applicable):** 5:25-cv-05897-BLF

9. Fee Type:*

- ☐ Attorney Admission
- ☒ Civil Case Filing
- ☐ Audio Recording
- ☐ Notice of Appeal
- ☐ Pro Hac Vice
- ☐ Writ of Habeas Corpus
- ☐ Other: _____

- 10. Reason for Refund Request*:** Explain in detail what happened to cause duplicate charges, no fee required, etc.

- ☒ Duplicate Charge ☐ No Fee Required for Filing ☐ Other

If you paid a filing fee using an abandoned case number, note that case number here and e-file the refund request in the **open** case.

✓ **Efile this form: OTHER FILINGS → OTHER DOCUMENTS → APPLICATION FOR REFUND.**

View detailed instructions at: cand.uscourts.gov/ecf/payments.

Assistance: Contact the ECF Help Desk at 1-866-638-7829 or ecfhelpdesk@cand.uscourts.gov Monday - Friday 9:00 a.m.-4:00 p.m.

FOR U.S. DISTRICT COURT USE ONLY	
Refund request:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Denied — Resubmit amended application (see reason for denial)
Approval/denial date:	
Pay.gov refund tracking ID refunded:	
Date refund processed:	
Request approved/denied by:	
Agency refund tracking ID number:	
Refund processed by:	
Reason for denial (if applicable):	
Referred for OSC date (if applicable):	